

## Transcript of Oral History of Marquis Allen By Kit Keintzman

**Interviewee:** Marquis Allen

**Interviewer:** Kit Heintzman

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**Location(Interviewee):** Tennessee

**Location (Interviewer):**

**Transcribed By:** Erika Groudle

### **Some of the things we discussed include:**

Working as an end of life doula. Grieving grandfather's death. Leveraging the use of online and virtual technology. Body language and body awareness. Interfaith connections. Pre- and post-pandemic capitalism, for profit healthcare, healthcare as a business, Big Pharma. Health insurance as a predictor of the quality of healthcare; inequities. Politicians weaponizing the pandemic. First hearing about COVID-19 from news coverage of China. Deaths measured in graphs, charts, and numbers. Inconsistent messaging about COVID-19. New stigma about illness and symptoms; fear of coughing in public. Pandemic fatigue and setting boundaries. Pandemic safety taking over people's lives. Global politics: Ukraine, Russia, North Korea, NATO. USA crime increasing, inflation and increasing home prices. 15 May 2022 mass murder in Buffalo, New York; shooter's POV video footage. Grief as a non-linear process; diverse responses to death and dying. Euphemisms about death. The pandemic restricting face-to-face access to clients, but also opening based to a larger virtual audience. Using PPE with clients pre- and post- pandemic. Empathy and active listening. Emotional regulation while working with clients; emotional experiences in private. People dying alone in hospitals. Personal space norms. Living far away from family and friends. Safety precautions at restaurants. Hope. Biases in history, the importance of African-American history. Recently traveling to Gambia and Senegal; traveling testing regulations. How easy it is to be misunderstood and misrepresented. The value of diverse perspectives. Don't forget about people who don't leave a record behind. Trauma responses and the long term mental health consequences of the pandemic

Kit Heintzman 00:03

Hello, would you-

Marquis Allen 00:06

Hello.

Kit Heintzman 00:08

Would you please start by stating your name, the date, the time and your location?

Marquis Allen 00:14

Sure, my name is Marquis Allen. The date is May 23, 2022. The time is 5:04 pm Central Time. And I'm located in Tennessee, the United States.

Kit Heintzman 00:30

And you consent to having this interview recorded, digitally uploaded and publicly released under a Creative Commons license attribution noncommercial sharealike?

Marquis Allen 00:40

Yes, I do.

Kit Heintzman 00:42

Thank you so much. I'd like to just start by asking you to introduce yourself to anyone who might find themselves listening to this, what would you want them to know about you and the place you're speaking from?

Marquis Allen 00:54

Sure, I am a- I'm a certified end of life doula. And I have been trained both within the United States and within the United Kingdom. I'm a member of several end of life doula associations, and I really believe in what I do. And I believe in trying to support others to the best of my ability. And what really brought me into this field, actually was the passing of my grandfather. And I actually did not have time to grieve. And so after doing research, I found that there was a such thing as an end of life doula, and that's really what got me on my way. So I founded Serene Transitions End of Life Doula Services LLC. I founded that after going through some motions, when it came to grieving with my grandfather, and then I really just took off running. So that's just a little bit about me. So yeah.

Kit Heintzman 02:11

May how old you were when your grandfather died?

Marquis Allen 02:16

I was, oh, gosh, I was around my early 30s. And so I was around in my early 30s.

Kit Heintzman 02:27

Would you tell me a story about life during the pandemic?

Marquis Allen 02:33

Wow, life during the pandemic. Life during the pandemic has been, it has been eye opening, it has allowed me to, for me personally, it has really, to some extent been a godsend because although my profession does require me to interact with people, I am more of an introverted person. So working remotely doing things without face to face, person to person- person to person, in person interaction, that I have no objections to that. So really, when it happened, it was like, Okay, wow, everyone is kind of adopting a new normal and what was not really considered normal at that time. That is meeting virtually doing a lot of things remotely and virtually, it really forced people's hand to have to do things virtually to have to work virtually to have to collaborate virtually, to have to interface virtually, to have to leverage the use of technology. And so I think personally, maybe accelerated that usage, but going all the way around the world to answer your question, a story that I- that occurred during this pandemic actually, is well, I don't talk about it in my Doula profession, so to speak. I am a spiritual person, I'm a religious person. And so it was interesting with my, with my church, we actually were going face to face and then all of a sudden, we had to go virtual because of the pandemic. And so there were a lot of growing pains. A lot of people cut their teeth on it. But it has been really, again, a godsend, so to speak, because it allows us even when we may have activities or an event planned, we're able to use technology. And so I think people really appreciate that. Some people do, some people don't, but being able to jump on the technology and use it. I think that that was not a thought it wasn't even a thought pre pandemic. But it has been now and I think a lot of people a lot of people are

a lot more comfortable now. Being able to switch between the two. So that's something that did happen in my own day to day living, if you will, in the pandemic.

Kit Heintzman 05:11

What did it feel like to have that move from face to face to online, religious community?

Marquis Allen 05:19

In a religious community and all religious- It was, it felt, it felt different. It's the equivalent, I would say, if you cross your arms, if you fold your arms right now, you fold them a certain way. However, you if you take time, and you try to fold them, the opposite. For example, if you cross your right arm over your left, naturally, without thinking about it, you have to think about crossing your left arm over, you're right, and it doesn't hurt, you're doing the same thing. But you're just doing it a little differently. So that was the experience. That's how it felt for me now, at the same time- At- That's how it was in the beginning. But even though I'm used to using technology, in a religious environment, it was really different. Because trying to facilitate trying to get the same experience, you can't really get that same worship type experience in a virtual environment, you can come close to it, but you really can't duplicate it exactly. Or replicated. Exactly. So while I liked it, because sometimes you can cut off your camera, and you can do other things while listening to a message or listening to songs and you can get things done. At the same time, it really kind of did take away from the in person feeling however, I'm a little partial to it, even now, if I have a lot going on. I want to jump in there. But because I'm a member of the staff, I and other people may not want to do that. It's it can be challenging, because of the fact that there are people that want to be face to face, and that is their, I guess modus operandi. And they will go to any limits to ensure that happens. So sometimes it can cause conflict on a personal level. Because you have some people that want to remain face to face, you have others that want to go virtual. So you have that element, you have different generations, the younger generation, they're more adept. And they're more inclined, and they will lend themselves to doing things virtually, whereas maybe a older generation may not be so inclined, but they if they wanted to take part than they really were forced to due to the pandemic. So again, it was a little stressful, it felt stressful, it felt good, a range of different emotions that took place when that happened.

Kit Heintzman 08:03

I'd love to hear more about your relationship to spirituality.

Marquis Allen 08:09

Well, my relationship with spirituality is- I'm a very open minded individual. And while that, let's say that necessarily doesn't always lend itself in a positive environment. In the traditional religious atmosphere, I try to keep an open mind. And I know what I was taught, and I know where my personal beliefs are. Yet, I have friends that are Muslims, I have friends that are Jewish. So I'm aware of some of those traditions. And I embrace them because I love them as brothers and sisters. And so again, I've been to I literally have been around the world in Dubai, I went to a mosque, and I worship there with my Islamic brothers and sisters, my Muslim brothers and sisters. In Rome, I went to Catholic mass while being in Rome, and I partook of Catholic mass even though I didn't speak Italian, and I don't- being there in that atmosphere. It was calming, it was peaceful. And again, people of different religious religions. Been to bar mitzvahs, things of that nature. So again, while I personally have my own personal beliefs, I'm very open minded. And I really appreciate other points of views, other religions, other thinking, thinking patterns, other beliefs, so I personally am extremely open minded and considerate of the religions and spiritualities and cultures of others.

Kit Heintzman 09:55

To the extent that you're comfortable sharing, would you say something about your relationship to health and healthcare infrastructure prior to the pandemic?

Marquis Allen 10:05

Health and health care infrastructure, I believe that- Well, I believe that prior to the pandemic health and health care, really, I think it needs a major overhaul. I'm not a politician. Nor do I aspire to be one. However, it seems like politicians, they seem to be the drag- a jack of all trades and masters of none. And even those that do have, for example, medical background occupations, they're still politicians. And I've always been cautious. We're cautiously optimistic that health care in this country will or was meant for the benefit of people. And I say that because many times, I believe, personally that the healthcare industry, as a lot of other industries, do, they put profits before people. And I think that's what tends to happen in a capitalistic society. But at the end of the day, maximizing profit in economics 101. That's the purpose of a business, regardless of what healthcare industry say. The healthcare industry says they're- they're a business. And their, their, their main, again, their main, what they do is, is a business and businesses to make money, you don't go into business to lose money, regardless of what slogans are touted or what marketing campaign is put on. At the end of the day, it's about profits, and the bottom line. So I think prior to the pandemic, I believe that there was disparity in health care, especially for people that may people the haves and have nots, people that have money, people that have insurance. And people that don't, just in my own personal family alone, there were two family members who ended up passing away, they did not have the best of health insurance, and they did not receive the best health care. And I think that's really unfortunate. It's become a political lightning rod and political talking points for politicians. But also, I do believe that race plays a factor. Being a minority myself. Seeing I'm not, I don't purport to know, everything. And I most certainly don't speak for all minorities. But some of the stories that the real life stories that people who are minorities, in particular people of color that they experience, when it comes to healthcare, pre pandemic, was already unfortunate. But now post pandemic, I think that what I just said, has been exacerbated. And at the end of the day, there's lots of incentive for people to do things right or wrong, to maximize profit and to make planning and when we look at things, for example, such as the pharmaceutical industry or healthcare industry, again, money is the motive. When we hear things on the television, and we say, it said that, "hey, you get a free vaccine", you should know, I don't think free the appropriate word. While there may be no out of cost. Expenses out of- free does not equate to out of cost, excuse me, out of no out of pocket expense does not equate to free. But again, people hear certain words, and they attribute certain meanings to them. So "Oh, wow. So I get a free shot or a free vaccine?" Well, they'll know there's just no out of pocket cost for you. However, there has there is a cost in the pharmaceutical industries, medical device industries, things like that. You know, I think it's, you know, at the end of the day, it- there's money to be made. And so, of course, if you can offer something and have it be reimbursed at the expense of jailer, John Doe taxpayer, then again, I think that we see more of that happening, even post pandemic, people getting grants and things like that, but there's an incentive, I think, post pandemic for people to let's say, behave badly, if you will. And that's no, not to be interpreted as a hasty generalization that all people operate badly. I'm not saying that. Or all companies do. However, I think that just in general health care in this country, post pandemic, the optics on it, haven't shown in the best light and that doesn't look good to the average person or they may not know what to look for. But again, looking at some of the details and well not details, but looking just at how- how healthcare and healthcare industry operates even post pandemic. I hesitate to say that everyone's operating with clean hands. So hopefully those disparities decrease between the haves and the have nots, hopefully the disparities decrease between the access to health care, the cost of health care, hopefully

things can or politicians or people can do things that can hopefully lessen the gap or lessen than the divide between haves and have nots, those that can and cannot. And hopefully, eventually, there can be equality and equity for all persons irregardless of social status, insurance status, race, gender, sexual orientation, things of that nature. So hopefully, maybe one day ideally, I might not be here when it happens. But everyone can be treated equally, and have a fair shake when it comes to the healthcare industry.

Kit Heintzman 16:12

In the pre pandemic world, what was your day to day looking like?

Marquis Allen 16:20

Was my day to day living? Or what was my day to day? I'm sorry?

Kit Heintzman 16:24

What was your day to day looking like? So living, work? How are you spending your time?

Marquis Allen 16:30

Well, really, it, it started out- Well, it started out again, a lot, mostly a lot of face to face interaction, a lot of face to face interaction, and a lot of just in person, everything. Lots of just really, lots of just it was quote unquote, normal life and waking up, having some tea, getting to work, checking emails, and making contacts and interacting with people primarily face to face, especially seeing people, getting up, driving and meeting clients, as well as being there with them and interfacing with them face to face personal, personally. Traveling, doing some traveling both personally and professionally. Just going to the gym, trying to stay trying to stay healthy. Going to the doctor going to the dentist. Cooking. Just normal, everyday stuff. I mean just normal everyday stuff. Spending time with family. That's pretty much it.

Kit Heintzman 18:03

You remember when you first heard about the pandemic?

Marquis Allen 18:08

Yes, I do. I first heard about the pandemic. There was talk of this COVID. And it was on the news. I watched the news a lot. And there was just talk of something from China. And it's just, okay. Something from China and didn't know what it was and it was, Oh, well. You know, I think COVID-19 and Coronavirus. I think people use those words interchangeably, even though they're not the same. So we hear about- we heard about Coronavirus. We heard about COVID-19. And there was no real understanding of what it was. And me personally I wasn't too worried about it. I guess being in the end of life doula occupation, and most people should know, this is not let me be very clear. What I'm about to say is not to take away from anyone's loss, pain or hurt. Please, really very clearly this is not intended to take away from that and hopefully if a snippet is and is played, this is not to sound insensitive or anything of that nature. However, I do realize that and we see on the news every day that people transition. Be it from car accidents or from disease or from a wide range of reasons people transition. And so looking we saw on the TV, we see numbers, we see graphs, we see bar graphs, we see pie charts, we see. And I think at that time, there was a political campaign going on. I know here in the United States, and there were politics involved. So of course, there was even more, there was even more quote, unquote, hype, if you will, to weaponize the pandemic. So I think there was a lot of information out there. I think there was a lot of misinformation out there. And I'm just looking, trying to keep things objectively seeing graphs and seeing Oh,

millions and 1000s and 100s of 1000s and 10s of 1000s. And so I just was like, Okay, well, we'll see what happens. And so things started to become more and more, there was more and more, it seemed like more and more things, the media, in particular, more and more information out there. It's dangerous. It's this, it's that and I just personally was like, Well, what what is really going on? Does anyone know what's going on? And at that point in time, again, like I said, there was a political election going on. So of course, there may have been some political may have been some political interference, if you will, or engagement, or so. The messaging was just very a bit confusing. And I think people can became confused. And people didn't know what to believe there was lots of speculation, there was lots of confusion, lots of misinformation. And I think people were just confused. And I think that, I don't know if you'll ask about it. But I think that may contribute to maybe some of the fatigue that people are experiencing now. Because you say this today, you say that tomorrow, it's like, you know, today, they say coffee is good for you tomorrow, they say coffee is bad for you today, you're supposed to quarantine for 10 days, and then tomorrow, it's five days. And, you know, you see some of the pushback from some of the, again, corporations out there, well, you know, corporations writing, "well, we need this lifted", or "we need this done", or "it's not this or that". And, you know, I'm like, "Well, I- Okay", you know, people exerting influence over over different types of people exerting influence people and corporations exerting influence, because I believe that, like the pandemic was getting in the way of business. That's, that's just the way it was. And so you start to see some of the interference from industries and companies, corporations, and now all of a sudden, they're coming out with statements and their own experts. And it's like, wait a minute, you know, and so it just became a bit overwhelming. People were afraid to- I personally was afraid to cough or I have allergies and you know, if something tickled my nose or if something caused me to sneeze I was terrified of sneezing because of the reaction that one might receive- I received from society. Oh, my goodness, you know, now we're setting your some extent public enemy number one. And, you know, just terrified to sneeze terrified to cough and people are looking over their shoulders and people are afraid of you. And it's like, you know, we're free. We're pre pandemic, it's like, okay, people would sneeze and, okay, no big deal. But all of a sudden, there were outages there. I mean, not allergies. I'm sorry, shelves were going empty. You couldn't find bleach you couldn't find. I'm thinking of myself where people cleaning before the pandemic because I know I kept bleach in my house, but it's like, oh, my goodness, what were people cleaning? You know, it makes you think, what were people doing before the pandemic? So again, it things just became it just hearing about it was just like, What is this? If it's something we've never heard before, and something we've never seen before? Like, my goodness, what's what's going on? You know, so who knows what it really is, if it hasn't been here before, but there was just lots of confusion, lots of competing messages and so- so it's lots of lots of competing messages and lots of lots of messaging out there. So just a bit of confusion.

Kit Heintzman 24:31

Did you have any strategies for moments where you may have needed to cough in shared space with another person?

Marquis Allen 24:39

I guess there were. There were and I would probably excuse myself, or I would do my hardest to just not do it. It's just like, if I had to cough if I had flatulence if I had, I just tried not to make any noise period unless I'm talking because it was just really uncomfortable. And so it just was extremely uncomfortable. So yes, there were incidences, but I tried my hardest not to.

Kit Heintzman 25:14

Have you had any of your own experiences of what sometimes called pandemic fatigue?

Marquis Allen 25:20

Yes, I have. I am at that point now. I am there. I suffer from severe pandemic fatigue. So, I have told people don't talk to me about it. I don't want to hear about it. I don't want, you know, a colleague of mine, who I'm very close with, you know, every- it became like, it controlled her life. And she was in a state of literal emergency, and she was the most- the most, oh my goodness, cautious, and preventative. And just, I mean, just really cautious and everything just, I mean, just, yeah, she was very hyper, hyper, hyper sensitive to the fact that there's a pandemic, and, and I would talk to her almost every day, and it was like, wow. Okay, you know, we're here, we're in it, we're dealing with it. And, you know, this was, and this has been over the course of a year after the pandemic started. So, you know, it started causing me anxiety, and it's like, Oh, my goodness, but at this point in time, I really, you know, I don't want to hear about it. I don't want to hear about the vaccine. I don't want to hear about any of the industries that deal with it. I don't want to hear about COVID I don't want to hear about you know, COVID-19 I don't want to hear about Coronavirus. And, you know, I certainly am mindful of those. And this is not to be dismissive or insensitive to those people that have suffered at the hands of Coronavirus at the hands of the Coronavirus, and were victims of COVID-19 that most certainly is not the case. But as an individual, I wish not to talk about it, I wish not to hear it. It's it's kind of like a person's sex life. You know, that's your business, and what you do, and how you take precautions that your business, it's not my business. So as far as I'm concerned, I take the appropriate precautions. I will not say anything to you or anyone else about if they wear face covering again, or mask play on words. People don't like the word mask, I believe a euphemism is face covering but you know, I'm not gonna say anything to you about that. I, you were you weren't you don't you don't? If you've been vaccinated, if you've had your shots, you've had them if you haven't, okay, that's none of my business, you know. So again, I have to maintain, you know, my business and my well being. And so at the end of the day, that's my priority. So I do suffer from it. And I suffer severely from it. So yes, I do.

Kit Heintzman 28:20

What are some of the ways that you've been reinforcing those boundaries with people when they bring it up? Or what are some of the ways that you've been protecting yourself from sort of like mass media communication about it?

Marquis Allen 28:36

Well, as far as mass media communication, that I try to limit my exposure to the news, because I know that there's going to be some segments on there about it. And I do understand that for the media's target audience, the target audience may be interested in that. Okay, or I don't know, maybe it's for ratings, call me a cynic, you know, but at the end of the day, I just try to limit my exposure to, to media, in any form. Even if you're, for example, on Facebook, you might see something about it in an advertisement. It's like, oh, my gosh, so I, I just try to limit my exposure that way. Also, when it comes to people, the people that are near and dear to me, I'll just bluntly tell them, hey, listen, I listen. I don't want to talk about that. Or, you know, Can we change topics or depending on who the person is? I will tailor my approach to be mindful of how they might receive what I'm saying. So it's just, you know, I'm not going to be nasty or ugly or anything like that. That's not my personality. And that's not my my, my technique, but when it comes to interacting with people at all, but just kind of saying, hey, Let's talk about this or let's talk about that. And if it starts to creep in there, I'll just say, Well, I'll try to change the subject, I will talk about something else, or, you know, if the boundaries are not being are not clear, then I got to make them as clear as possible and just say, Listen, you know, as far as I'm concerned, you know, I'm there, I'm fatigued with

COVID, I am fatigued with pandemic anything. So let's change the topic or let's go on to something else if we can. And I'd really appreciate if we can, and most people really respect them. Most people really respect that. And so once I get it out there like that, but again, I just tried to just be optimistic and talk that there, there are plenty of other things to talk about in the world, besides the pandemic, so I try to gravitate towards that.

Kit Heintzman 30:55

Yeah, there have been plenty of other things going on in the world kind of all the way through the last two years overlapping with the pandemic. What are some of those things that have been on your mind?

Marquis Allen 31:09

Oh, wow. Where do you even start? You have you have foreign situations going on. You have the invasion of Ukraine with Russia, you have nuclear testing going on in North Korea, you have I believe, some of the European countries trying to join NATO, you have- that's just foreign overseas. You have just here domestically, you have crime has started to increase. Cities like Chicago cities, like where I am, Memphis, you have crime increasing. That, and again, that's just this year. So we could it could keep going, crime is increasing. Inflation is on the rise. That's on the rise throughout the nation, and which is causing home prices to soar, which is I think further disadvantaging certain people. But the economy, I mean, inflation is, is going through the roof, interest rate rises by the Federal Reserve that's going on you have incomes are kind of stagnant. Whereas of course, when prices excuse me in, some wages are going up, however, others are not. So you have people graduating high school, or you know, getting entry level jobs with a starting salary or starting wage that may be equivalent to what some people started a wage at 10 years ago. There's income inequality. here domestically, you have- There was a shooting in Buffalo, New York, where 10 minorities were targeted, because of their race. That's my understanding. You had that going on. And I watched the video. And when the gentleman got to a Caucasian man on the floor, he apologized to him yet he- shot a African American woman in the head on the video, and to see him pull up and shoot people in cold blood. That was very, very emotional. Knowing that, as an African American male myself that I that could have been me or someone I loved. And seeing that happen, people just going grocery shopping and not knowing that would be their last day on earth. Things like that going on, you have all kinds of racial inequality, racial injustice, as you have, for example, George Floyd and you have, gosh, Jordan Davis in Florida long time ago. George Floyd, you have, gosh, there's so many of them. I can't. I can't name everyone. The racial injustices that are going on. The inequality that's going on. Gosh, I mean, there's just crime. There's people living on the streets, there are people that are losing their homes that can't pay their bills, people having to make decisions "Hey, do I buy my medicine or do I buy some food for my children or for myself". People are having to make literally life or death decisions. While people are on the news, talking about you know multibillionaires going to space. You know, it's it's you have those types of situations going on here you have, oh my gosh, there's just so many different competing topics that are that are that are on TV that are in the media that are going on in the world today, people. There's, there's a political election around the corner. So we'll see the ads and we'll see the viciousness. There's a political candidate, I think, you know, Trump that he's in certain people's crosshairs and people want to take him down or whatever people are focusing on that people want to know about his taxes, you know, people are, you know, still holding on to that people are talking about Hillary and emails. People are talking about bitcoin and cryptocurrency and patriotism, man, you know, Blue Lives Matter and all things like that. So I mean, there's so there's so much going on in the world today, that I mean, you just, you literally just, you can just, just throw something and hit it, and that it'll cause controversy, the Facebook groups, on Facebook groups, people complaining about, you know, in their neighborhood about, you know, cars driving too slow or driving slow on the left lane, or, you know, this person, they made my sandwich wrong at Wendys. So



I mean, literally, like, you name it, somebody's talking about it, you know, in Florida, the Governor Ron DeSantis, going at it with Disney, you know, you have that going on, you have same gender, you know, gender, same gender loving and rights and things of that nature, there was a week after Supreme Court about the opinion of Roe v. Wade. So I mean, literally, you can just, there's plenty of other stuff to talk about. That stuff might be just as controversial, some of it may be more than the pandemic. But with that being said, there's lots of positive going on in the world, too. So that's just not to say, the negative, there's lots of positive things that are happening in the world as well. So you know, there are lots of positive things that are going on. But unfortunately, it seems like maybe the negative gets a little bit more pressed and the positive, which is unfortunate. But again, you know, I'm not in the media business, and I'm not a politician. So I don't really, you know, have a vested interest in delivering one message or another to a particular audience. So.

Kit Heintzman 37:38

Buffalo is really fresh, I'd like to ask gently how you decided to watch the video?

Marquis Allen 37:54

How or why?

Kit Heintzman 37:56

We'll treat those at the same question. Well, yes, well, why?

Marquis Allen 38:01

Okay, well, why? I wanted to watch the video because I want to see for myself. And, of course, there are certain restrictions. We had governmental, local, whatever. But I wanted to see for myself what happened. I wanted to see. And that is why, how online of course, but it was, I just want to see I had heard about it. And I'm like, what, what is this? You know, what's, what's going on? And usually people that are close to me, you know, they'll sometimes update me on things that are going on. And I said, what's going on? What is this Buffalo, New York, because I had heard of a shooting in a subway earlier. And I thought that was the same one. And it's really sad. It's really unfortunate, where it's like, Oh, I thought that was the same thing. But it wasn't. And so after watching it, it just it it was just like, whoa, like, wait a minute, you know, and seeing that was just really, again, heartbreaking. But I just I wanted to see for myself, what occurred. And I, I wanted to see for myself, of course not not breaking any laws or anything like that. That's not what I do. But I just want to see for myself, what was the what was their experience? And I saw it, and what was his experience from his viewpoint? And I saw that, again, I just saw but I can't go into anyone's mind or get into the operation of that. But just to give me more context with what I was hearing ubiquitously in the media. So.

Kit Heintzman 39:51

Thank you so much for sharing that. I'd like to ask you See how it's gonna take me a second to word this question.

Marquis Allen 40:07

Okay.

Kit Heintzman 40:16

I'd love to hear something about how your work with grief has shaped your relationship to death over the last two years.

Marquis Allen 40:32

Oh wow, how my work with grief has changed my relationship with death over the past two years. Um, for me, it has been kind of a yo yo effect. And some and, and I say this, I say this jokingly I like to joke and I like to play but it's really been kind of like a yo yo effect, because some days it's like, okay, am I dying? Kind of like hypochondriac mode? It's like, is something wrong with me? Or am I okay? Or when I eat something? I'm like, okay, is this going to bring me closer to death. At the same time, it has also opened up my eyes to things that I otherwise would not have been able to see or may have been insensitive to. So it has really, really opened up my eyes and given me a different outlook on in particular the dying process. I've learned a lot more about grief, and what happens when people grieve, and realizing that grieving isn't just a state, but it's really a process. And it's non linear. So there were misconceptions that I had about grieving and the grieving process that I learned, and I educated myself on. And in doing that, I think it really opened up my eyes to be a lot more sensitive to others. One example being that I never realized that someone may be happy that someone is about to die, or is actively dying. I never thought about that, that never entered my mind. I never thought about that. Like why would someone be happy that someone is about to die? Or is on life support? Or, you know, why are they why might they fake or Feign sadness? Well, things we don't think about, let's say, for example, that person may have been a victim of molestation by the dying, or that person may have been a victim of domestic violence, or they may have been in some way, shape, form or fashion, traumatized or abused by the dying. So naturally, someone may think that because a person is dying, that they should be sad. Whereas a person that may have been a victim at the hands of the die, they may not have that experience. And so it really opened up my eyes. That's just one example. But with me as an individual, it really has allowed me to have a newfound appreciation for relationships for interactions with other people for respecting other people and having a real a real appreciation for life. It really has it has made me a lot more optimistic. It has made me a lot more sensitive to the fact that we all have a limited amount of time here. Irregardless of your education, irregardless of your money, irregardless of who you know, those things might help you here on Earth, but they certainly can't stop what the inevitable is. And we think some people say, Oh, well, hey, you die once and get Well excuse me, you only get to live one. Well, excuse me. They say you, you you die once but you're living every day. Whereas people that may be grieving, they may think that they are suffering every day, which some people are but at the end of the day, we all really we all last time I checked, unless we start getting into the medical and all that stuff. Well, I saw the light or I blacked out or your heart stopped or defining death and things like that. I am not an attorney. I'm not a doctor. So I'm not going to venture in their arena. But as far as I'm concerned, you know, we all have to leave here and hey, we better make the most of it because at the end of the day, we don't know. Like those people that went grocery shopping in Buffalo, and again, I'll represent again, they had no idea that they would wake up that morning. And that would be the last morning that they woke up, they had no idea. So, you know, we could be just going to the store, I mean, just driving up the store. And that could be the last time we didn't have any idea, you know, you just go into the store. I see different articles. And it's like, well, a gentleman was, was going to his friend's house, and all of a sudden, I think he ran off the road and wasn't wearing a seatbelt. And, you know, came out of the vehicle, died, his mother was trying to search for amusing Facebook and things of that nature. And it's like, you know, she's looking for him, Hey, son, if you can hear me, you know, um, you know, just please respond. And I just find myself. And I don't know exactly what it is, I think it's some type of, I'm not gonna say it's a bias. But, for example, I don't know if you have this experience. But hey, let's say you get a new car. And you have a, I don't know, a Honda Accord, I'm just throwing it out there a person, Jane or John Doe, gets a new Honda. And all of a sudden, you notice all the other Honda's on the road, whereas before, you did not notice them? And I don't know what psychological definition or what would describe that. But I know there's a name of it, I forgot the name of it.

But it's, it's just one of those things where now you're a lot more cognizant, and you're a lot more aware of these things. Whereas before, this wasn't something I would have thought about, like, oh, like, I just think about this, I didn't think about any of it. Like what is like, I didn't think about that. But now all of a sudden, you're a lot more aware of what's going on. And it's like there's a hypersensitivity to death, and, and dying. So. Yeah, that's, I think I may have rambled a little bit. So I hope I got your, your answer. So again, I'm just a lot more aware, just a little bit more hyper aware. And those stories, kind of get my antenna of they get on my radar a little bit more. And so it's like, oh, that's a story about somebody transitioning or stories about grief or dying or death, it's those things kind of pop on my radar a lot easier. And they bring to my attention a lot easier. Whereas before, I don't think they did.

Kit Heintzman 47:27

I'd love it if you shared something about why you use the language of transitioning.

Marquis Allen 47:35

I use the language of to be very honest, I'll be transparent, because of the fact that number one, we're being recorded. And so I'm not sure who will listen to this. So I'm trying to be sensitive to that fact. But also, some people don't like the word death, or dying, you know, that person was dying, that person is dying, or that person died or that person, you know, I guess I use a kind of like a euphemism, because it is a little bit more palatable. Now, as a doula we are. Some people say that we should use the word dying a lot more easily. However, I understand. And I appreciate that. However, I must be sensitive to the needs of people, if someone is not ready to hear that word, or is not ready to use that type of language, then I appreciate that I would rather be a lot more cautious on the front end, and then find out where a person is. And then from there, if they're open to using, hey, that person, that person died. That's, that has a lot more impact than using the word transitioning. So I'm mindful of the potential audience that I may encounter, not just in this recording, but also in in the public. And I think just being understanding of that and being empathetic, can help because again, even though as a doula as an end of life, doula, I'm still a person, and I'm still an individual, and you really don't want to turn off people if you will, or Oh, are they they're really all they talked about his death or dying and, and not meeting people where they are. So again, some people are not ready to hear dying, or they- they're dead, or they're just not ready for that. And I respect that. And I appreciate that. So I may use the word transitioning, or similar words to be respectful and sensitive to people.

Kit Heintzman 49:52

Would you describe some of the services you provide as an end of life doula?

Marquis Allen 49:59

Sure, oh, Um, as an end of life doula some of the services that I provide are advanced care planning, bereavement support, advocacy, assisting people with their legacy projects, assisting people with a legacy project or a life review companionship or caregiver respite, helping people implement their visual. And in certain cases, medical aid and dying however, [unknown word] still as, as a as a as a, again, helping people in those areas. And again, I make it explicitly clear, in no uncertain terms. I'm not a therapist, I'm not a counselor, I'm not a social worker, I'm not a healthcare provider, I'm not an attorney, I'm not a financial adviser. I'm not a funeral director, I don't provide legal advice. I don't do any of that. So I am very mindful and respectful of those occupations. And I dare not come across as if I'm in that line of work. Not only could that open up potential litigation, but I certainly want to have

respect for those persons that are in that capacity, and not interfere or get in there, get in their professions. And I don't play one on TV.

Kit Heintzman 51:26

Are there ways in which your services changed during the, during the pandemic and because of the pandemic?

Marquis Allen 51:34

Most certainly, one of the major way that it changed is when the pandemic occurred, access to clients was restricted because of the pandemic, so whereas a hospital, you could go and visit someone without reservation. Now, and especially when the pandemic occurred, you're having to interact with someone virtually, or you- They can't have visitors or they can't be seen, or they've had their visitation, they've met their visitation limit for the day. So it's like, when I need to be a service person, ultimately, as a doula, so how do I interact? So of course, there had to be changes both contractually to capture the fact that, okay, before there was no pandemic, so, I did not have to worry about liability when it came to potentially exposing someone not saying that I did that or not saying that, it didn't happen, and it didn't occur. However, again, having to update paperwork and contracts and tempering expectations. Whereas someone may have wanted you to be there, physically in the room due to the pandemic, I can't. Not because I don't want to, but because I can't. So I will do my best, given the constraints that abound, I can do my best to be there. And I certainly will do just that. However, finding workarounds to support clients, was, I think, one of the biggest, one of the biggest changes that occurred, utilizing technology, but then at the same time, I will say this, I will say this was a positive element, because never for a minute did I think that I would be able to serve clients internationally, or help people internationally. So it's like, well, you know, that was a silver lining, where it's like, okay, well, you don't have to limit yourself to the people in your local metropolitan area, you can actually help people beyond borders, you can you can go beyond borders. So that was a silver lining.

Kit Heintzman 54:10

Do you have much of a sense of how your clients find you?

Marquis Allen 54:16

How they fund me?

Kit Heintzman 54:18

Find you.

Marquis Allen 54:20

Oh, find, find! Well, online from what I do. I am kind of a- I don't want to say a numbers nut, but I love data, and I love metrics. And my, from what I and from what I've seen is primarily it would be word of mouth. And second place from that would be a doula directory. Because when I usually ask people because I want to track that to see well, what's effective and what's not. So, you know, I guess kind of using the I, gosh, I forgot what it was. But it's something to the effect where, you know, 70% of the results come from 30% of the people and I forgot what that one. But just, I believe I, most of it is word of mouth. And then directory. So that's what my data yields report.

Kit Heintzman 55:36

What was it like establishing relationships with clients and patients online?

Marquis Allen 55:48

It was challenging. Because online, you even via phone call you really, you're missing that body language, you can't see the body language. And you don't know how people what people are thinking, well, not that, you know, any. I can't read minds. But you don't. It's like you don't have all the information. You don't know how they're what they're kind of going through, because it's one of those things where, hey, you're walking down the street, and someone says, "Hey, how's it going?" And you say, "Oh, I'm fine", you're not really fine, or you may not really be fine. But it's one of the things where you say it, and you just keep moving. And, okay, a person can say something. But unless you're there, sometimes you may not be able to gauge or, for example, maybe see a tear forming, you can see it maybe once it rolls down someone's face, but you really are unable to tell that sense of that sense of that physical sense. It's just it's, it's, it can be challenging. And I really, again, I try to meet people where they are to see what type of energy they have, and just really explore and take it from there. But again, it can be and it has been a little challenging, because I'm more so used to interacting with people face to face. So it was a little challenging.

Kit Heintzman 57:22

While respecting client confidentiality, is there something you can say about your own experiences of working with clients over the pandemic?

Marquis Allen 57:33

My own experiences in working with clients over the pandemic, while of course respecting client confidentiality, is that it, it varies. And I know that's, that's common sense. But the, there is no, there's never been this, it's kind of like a snowflake. And you never get the same one, or the same experiences or the same anything. There is no cookie cutter client, there's no template client, there's no you know, just one size fits all. Okay, I'm gonna use a checklist and I'm gonna go bam, bam, bam, bam, bam, and do this, this, this, this this? No, it doesn't work that way. And, you know, someone expects that or wants that might not be the right, the right occupation, or the right, the right. The right calling, because there is no instruction guide, there is no book, there is no checklist that you can just, oh, well just knock them out and then go on to the next one. And if someone does that, with all due respect, I wouldn't want them to be my doula. Because that's just not you know, that's not i That's not how I operate. But, but also I think it has taught me is that being authentic and being genuine goes a long way. Because I think people can sense can pick up on maybe phoniness or, or fakeness. And at least some people can. Not that I'm phony or fake. I'm not saying that. But what I'm saying is that people they they can tell when you're genuine and at the end of the day, me myself there have been incidences where, where, you know, I'll just tell someone, hey, you know, you, you know, given where we are, you know, we certainly I certainly want you know, I tell I tell everyone this. Of course respect and confidentiality that listen, you know, go out and see if there are other doulas that you may want to collaborate with or you may want to serve you because at the end of the day, you know, this isn't just, you know, something that always just fly by night. It means something to me. It's it's heartfelt. It is a calling, and I invite high encourage people to do Hey, you may want to talk to other doulas. Or you may want to see, you know, what's a good fit for you. So, you know, it's not like a date or anything like that. But at the end of the day, you know, I want, it's important for me, it's not about what I want, but it's importantly for me, that a person is comfortable with me. And that they've also had an opportunity to explore other doulas out there, if they so desire. So yeah, I hope I answered your question.

Kit Heintzman 1:00:31

You did. And I want you to know that it's a premise of oral history that you can't do like you can do no wrong. Whatever you offer is this beautiful gift. So every question is answered correctly and interpreted correctly, there is no rambling. Oh, except for me when I form a question. [Marguis Allen laughs] Did you have experience with clients pre pandemic who were dying of something potentially infectious that you had to navigate?

Marquis Allen 1:01:11

Yes, I have. And when you say infectious, can you clarify method of transmission or mode of transmission? Because whhh- Because there are certain things that, for example, may be airborne, may be blood borne pathogens. Do you mind clarifying that? Or? Could it be just anything?

Kit Heintzman 1:01:34

Certainly, I really just mean anything that in your working with them could transmit to you. So whether that's something airborne or if your work has a risk of blood contact? Anything, anything that might have you at risk and how you navigate those?

Marquis Allen 1:01:56

Ah, yes. There there have been incidences where that has been the case. And I use PPE, personal protective equipment. At the same time, I say this. I use PPE primarily so I may use gloves or, or even like in the pandemic right now, you know, it's, it's, I use a n95 mask, so I'll use that. And whereas appropriate, I wear gloves, and I just let the clients know, this is not any, this isn't personal. This is just for our protection. It's kind of like when you call a, a call an 800 number, you know, this call is recorded for quality assurance, you know, for we're going to verify the last four of your social for the protection of your account, you know, I worked in a bank and, you know, we say things like that we're, you know, it's kind of like not a play on words, but we're protecting you by doing this. And so, a person thinks well, okay, it's not as invasive or they it kind of takes the edge off a little bit. So of course, I let people know that hey, this is for our protection. So for both of us, not just it's not Oh, you have you know, you have a goose bumps or something and I'm, you know, the cooties and I'm, I don't want to get them. You know, people don't, of course, even if they did have something transmissible, I think that it's still appropriate, to be respectful, and not to have them feeling as if they are, you know, like, like, I felt when I you know, if I sneeze out in public, you know, no one likes that feeling. So, even if you have something transmissible or if you don't just treating people with respect, all the way around, but yes, I personally use PPE I tried to protect myself and again, it's just not about protecting myself but also protecting others because if I did come in contact with something, there's the potential for reinfection or transmission to other persons and so I certainly don't want to do that as well. So, again, just making sure everybody's safe, being all inclusive, that everybody's protected. And that hey, I you know, I don't know maybe I came in contact with something with somebody with COVID and me using PPE will protect that other person. So I certainly want to be respectful of that and not transmit anything myself. So again, it goes both ways. I know you asked specifically about a potential client that may have something transmissible but also I do protect I just try to take precaution every parties involved.

Kit Heintzman 1:04:36

I'm curious what does the word health mean to you?

Marquis Allen 1:04:41

Health. What does that mean to me? Health I guess. Today it's, I guess the status of your Forgive me I'm not the most eloquent speaker. The status of your body, the status of your life, if you had a little status, symbol of battery

status or something like that, it's just kind of a, what is your health? Your health is all encompassing, it's mental. It's emotional, its spiritual, its physical. So maybe I just expanded my own definition by saying that but I think health can mean a different variety of things. It is I think, all inclusive of your mental well being your physical well being your spiritual well being your emotional well being. So I think the well being of, of all those things, what is the status? Are you Are you healthy, emotionally healthy, healthy financially, I think the status of something, you know, the the healthy. I don't know, Merriam Webster might have a better definition than me. So I'm not sure if I'm the right person for that. But you asked me what I thought it was. So I tried to tell you

Kit Heintzman 1:05:59

What are some of the things you'd like for your own health?

Marquis Allen 1:06:04

For my own health, I would like to make sure that it's in tip top shape, I want to make sure that I'm healthy, I could stand to lose a few pounds. But I just want to make sure that I'm healthy. I want to make sure that hey, I'm in the right place mentally, that I can make competent, and sound decisions. I want to make sure that my mental health as well. You know, am I, you know, is there something going on with me physically? Do I need to get an EKG? Do I need a CAT scan? You know, what, what's going on, so I can stay in the best possible shape. So I don't burden others with my own health. Spiritually, you know, am I healthy spiritually? Am I where I think I should be? Am I healthy? Financially, you know, especially given the, the current state of the country and everything going on, I just want to be as best as possible, given the conditions around me just taking precautions to remain here for a little while longer. So in making sure that I tried to do what I could and that I did my part, to try to stay here a little bit longer and not engage in maybe activity that might slow down upon you.

Kit Heintzman 1:07:31

How do you think we could get to a or like, how do you think we get to a system where those where that kind of health would be easily available?

Marquis Allen 1:07:47

Oh, gosh, I personally think there's this question is really like an onion. And I think there's so many layers. You know, I'd probably still be talking about this, like, a week later. I really think that. Well, I guess I will seek clarification from you. When you use the word we do you mean Americans? Do you mean, humans? Do you mean adults? Do you mean? I guess because that would kind of drive the answer.

Kit Heintzman 1:08:29

I'm gonna bounce it back to you. Pickaway.

Marquis Allen 1:08:33

Okay, you're, you're good luck to you use I guess for for simple purposes, maybe the people on earth, you know, I think that maybe knowledge, understanding, empathy. I think that some of those could be a great start knowledge, understanding and empathy.

Kit Heintzman 1:09:03

Would you share an example of a moment where you received empathy over the last couple of years?

Marquis Allen 1:09:12

Sure. When I received empathy, actually. Well, I'm gon- honestly, with an, a, a- I was in a seminar, and we actually had to roleplay and while I'll be at simulated, you know, I thought that the, the person with whom I was role playing with did a really good job of empathy and active listening. So I guess that was a scenario when we were doing some, like I said, some role playing and we- The, the, the other individual, I believe an aspiring doula. I was very, very empathetic, and you know, demonstrated some of those characteristics. And I was like, I was really impressed if I'm talking about it now, you know, that person must have been been really good. And they did a fantastic job. So I think that was that was an experience.

Kit Heintzman 1:10:18

Can you pinpoint any of the ways that you learned to practice empathy?

Marquis Allen 1:10:25

Sure. One way is active listening. All too often we are thinking about what we're going to say next, as I'm doing here. But really taking time out to actively listen, and to clear your mind. Because all day every day, our minds are racing, racing, racing, racing, racing. And, you know, we've really got to, if we oh my [Marquis Allen yawns], I'm not yawning at the interview please, That's not what I'm doing. Practicing empathy by listening by removing ourselves, one of the things that I do, and I will say this, it's a little secret, if you will, I try to remove I mean, my you know, and because it's not about me, I try to remove it in the mind. And focus on you yours, and your because that, that helps, because it's not about me at the end of the day. So if you want to empathize with someone and put yourself in someone else's shoes, you have to put yourself in their shoes, which does not involve wearing your own. So you need to forget about yourself and focus on them. So just a few.

Kit Heintzman 1:11:55

What are some of the emotions you've experienced from clients who are on a path to transitioning?

Marquis Allen 1:12:07

Some of the emotions that I've experienced, to be perfectly honest. When I'm there, when I'm with them, I remain typically. What's the word? I typically remained open and available. I'm not really sure those would be classified as emotions. However, in the privacy of my own, my own dwelling, I dealt a range of emotions from sadness to oh boy, sadness to despair, hopeless. Because me, I as a doula. End of Life doula not broken doula, just to clarify. I don't. I don't show those emotions with the client because someone has to remain relatively strong. And that's what I do. However, again, I'm still a human. And I am. I'm a son. I am a brother. I am an uncle. I am a grandson. I am a I'm those things and so just like a client may be a daughter, a son is different things to different people. They are different things to different people still in mind. And I can't help but to think about if and when? Well, not if, but when? Well, if I if I don't transition before someone else. But when I will have a similar experience as one of my clients. There was an incident where a person passed away and a child passed away. A client's child passed away and I was there at the service, the funeral service and it was very hard for me seeing a mother and a father. Walk past the casket with their son in it and And that was probably the one singular incident that I almost lost it. And it was very heartbreaking. To see that in particular, because it resonated with me because again, I am a son myself, and I have a mother and a father, and they're still living, and to see what it's like, if I were to die, or if I were to transition, what they could potentially go through, it was just heartbreaking. So that. Yeah, but normally, I think I like to think I'm pretty, pretty, pretty level not not stoned or not stoned. Okay, let me be very clear that stone faced are just stonewalled. But I'm certainly not stoned when I serve clients, I don't engage in that type of



behavior. So in that at all, but not judging those who do that's your business. But I'm just not emotionless and there with the person. However, I also have to remember that I have to remain clear headed, and I have to I can't let my emotions take over because I would just want to, I would just want to hug everyone and just, you know, say it's gonna be okay. And the emotions can just have you know, I need to respect the doula code of ethics, and all of those things. And so but again, yeah, that that's that so, yeah, that's all.

Kit Heintzman 1:16:40

What are some of the reactions you've observed in your clients as they are dying?

Marquis Allen 1:16:48

Well, some people are some of the reactions they can range from guilt. They can range guilt to some people are thankful. Some people are dismayed, some people are anxious, some people have been they felt, wow, nervous, rejected, weak, mad, furious. So literally, all a range of emotions there have been fearful, you know, some people have been happy, because they know that they, they have their certain beliefs. And so again, depending on their their religious belief, and who I'm working with it directly the emotions are infinite. So I have experienced a wide range.

Kit Heintzman 1:17:51

Did you see any changes in emotional reactions from people grieving and dying in the last two years, in contrast to what you'd seen before?

Marquis Allen 1:18:04

Um, I have, pre pandemic, I think now, during the pandemic, it's hitting people, certain people a little bit harder, especially for those people that are having to transition or die alone. People that are in hospitals alone, that do not have access to their physical access to their families, friends or loved ones, they can't touch their hand, they can't hold them, they cannot. They can't see them post close, they can't feel their warmth, and touching theirs, they cannot hug them, they cannot embrace them. And so I really think that has hit some people really hard, I really think it has hit some people really hard, because it's bad enough that someone is losing a loved one. But if they're in the hospital, and they can't come and see them, or they can't come in, hold them or touch them. That, in my experience has been one of the toughest parts. In this pandemic, that post pandemic, in this post pandemic world, I think it has been one of the most it has been one of the most it has been one of the things I've had to go through. Whereas post pandemic, you can be around your loved one, there are no restrictions, you don't have to worry about any shots or, or anything like that, if you know if that weren't there, they weren't worried about those things. Whereas now, you don't have to worry about those. And it's sad because having to see people in their loved ones and there's nothing I can do. There's nothing that they can do. There's nothing that anyone can do. Because people have their policy. They have their regulations, they have their procedures, they have their protocol. And so that's really heartbreaking. See that, whereas again, before the pandemic that wasn't on factors so that in my observation that has been a barrier.

Kit Heintzman 1:20:06

Has your relationship to touch changed over the last couple of years?

Marquis Allen 1:20:12

Has my relationship to death changed?

Kit Heintzman 1:20:15

Touch. Although death has- I'll also li-

Marquis Allen 1:20:20

Okay, okay. Has my relationship to touch change? It has somewhat, but not a lot. I'm not really a well, I'm gonna leave that out of here. Well, I'm not a touch your, or a hugger. I will if I know you or something like that, but if you're my immediate family, then I'm very touchy, touchy, feely. feely. huggy. huggy. If you're not my immediate family, then. Okay, what's going on here? I'm just, yeah, yeah, I'm just, I'm going to what's going on? Now? What are we doing? What's going on here now? Like, you know, I want to know, because we're touching what's going on? Because, again, you know, it's just maybe it's a paranoia or anything like that, or something like that. But it's just kind of one of those things, okay, well, we just, we should keep our hands for ourselves. That's what I was always taught. That's it. You just keep your hands to yourself. So, you know, we don't have any misunderstandings, we don't have any misgivings. We don't have anything like that. We just keep our hands to ourselves. And so I respect that, you know, I, I can appreciate people that want to hug everyone and give the world their hug and their love. As far as I'm concerned, you know, okay, I appreciate that. But, but yeah, I'm just kind of like, okay, we, we can keep our hands to ourself. And this was pre pandemic. So it's not like it just occurred.

Kit Heintzman 1:22:03

And now I'm going to ask your question, Has your relationships to death changed over the course of the pandemic?

Marquis Allen 1:22:09

Oh, man, I've got to stop inadvertently given questions. It has, it has, it has, it's, again, it's just something being more aware of more. And just something to be said, just being a lot more open minded. You know, just sometimes I find myself thinking about, hmm, that would be good at my funeral. Like, that's a good idea. Like, how can I implement that in? You know, so I find little ways and, and I noticed little things I'll see. Like, for example, I may see a gray hair, something popping up where I'm like, man, you know, I'm getting old here. Like, you know, I'm getting closer to the end. Like, it's really happening, like, you know, and I think well, not necessarily, I just think how, like, what's, how's this gonna go down? How's this gonna happen? So, I think about those things.

Kit Heintzman 1:23:09

Are you able to maintain kind of social connections that mattered to you, throughout the pandemic?

Marquis Allen 1:23:17

But yes, I have, there has been no change in that. You know, I've, most of most of my life I've, I've, when I left college, I, after I graduated college, I've always been kind of my family and my friends, we've always been spread out. So we've always had to communicate in one shape or form. We've always had to kind of communicate the way we communicate now. So this isn't a change. I don't know how many minutes I put on my phone or anything like that. But like, yeah, we stay in touch. But there's been no change there. That's just been business as usual.

Kit Heintzman 1:24:05

What does the word safety mean to you?

Marquis Allen 1:24:09

Safety? Safety! The word to me the word safety means? Gosh, let me come up with something that's- safety. I guess to me, it means. Safety means to me not being in harm's way or not being subject to hurt or harm or danger or not subject to those things.

Kit Heintzman 1:24:50

Thinking in the really narrow confines of COVID precautions, what are some of the things that you changed to feel safer?

Marquis Allen 1:25:04

Well, wearing gloves and wearing masks, for example, if I go out to eat, and I go, just went yesterday to a restaurant where it was kind of self serve, so I don't touch the tongs, I will either use gloves or I will use a napkin or paper towel. Or if I do touch them, I touch them first. And then I wash my hands and eat to help prevent cross contamination. So I don't want to- I want to minimize cross exposure to things like that. So I just doing that and usually wearing masks I'm not in just wearing masks. And I mean, socially distancing, you know, you can try that, but someone's gonna happen, you're in the supermarket and you're like, can you you know, I don't want to get out of character just they can, Sir, Ma'am, can you please give me six feet or something, you know, people, personal space just isn't a concept to some people. But again, you know, I don't want to go to, you know, I don't want to ruin my career reputation, or over, you know, or anything like that. Not saying I would but it's like, you don't know the like, man, we're in the outer checkout. And you're next to me, and you're in front of your basket or your buggy. Can you go behind your buggy, and put the front of your buggy next to me so we can have some distance. And so, you know, again, I just try to change my behavior. And just try to, you know, take those little steps to try to mitigate risks, if you will, and to increase safety.

Kit Heintzman 1:26:47

How are you feeling about the immediate future?

Marquis Allen 1:26:51

I am- The immediate future, I'm cautiously optimistic. That's all.

Kit Heintzman 1:27:06

What are some of your hopes for a longer term future?

Marquis Allen 1:27:10

I hope for world peace, I hope for equality, I hope for equity, I hope for justice, I hope for diversity, I hope for inclusion. I hope for accessibility. I hope for all of those things and so much more.

Kit Heintzman 1:27:34

What are some of the ways that you've been taking care of yourself during the pandemic?

Marquis Allen 1:27:41

By trying to trying to do some of the things that I was doing post pre pandemic, trying to spend time with friends and trying to spend time with family and loved ones and really appreciating them and try to spend as much time as I can with them. So when I can so but just really valuing them appreciating them and just trying to prioritize self care. Sometimes they're competing priorities, but trying to prioritize self care.

Kit Heintzman 1:28:23

I'm coming to the end of my questions, and my last ones are a bit odd.

Marquis Allen 1:28:28

Sure.

Kit Heintzman 1:28:30

I'd like to start by asking what do you wish Americans knew more about in history? So thinking of Americans right now, what do you wish Americans knew more about?

Marquis Allen 1:28:48

I personally wish more Americans knew about African American history. You can call me bias if you'd like. But, uh, but I really, I really wish that there was more emphasis placed on that. And I, I say that with hesitation because depending on who's telling the story is going to be how the story is going to be told. So, again, that's what I would wish so I wish that there was more emphasis on on African American History and, and in particular, some of the accomplishments of African Americans because you know, I don't know if you notice, but it seems to me that for example, when Will Smith slapped Chris Rock? You know, that resonated more than I'm sure- I can't think of an accomplishment off the top of my head but I am pretty certain that there were African American kids that possibly graduated with scholarships and got accepted into colleges and things of that nature. But that act of violence was we heard more about it than some of the positive things that African Americans do and have done. So I just think that I would hope that African American history, so in some of the advancements and some of the accomplishments of African Americans, until having it be an equal playing, playing field, so, you know, if we spend, let's say, 20 hours talking about European history, why not spend 20 hours talking about African history? So we know about the Nina, the Pinta, the Santa Maria. But what about the- What about where Kunta Kinte was, and, gosh, I forgot. I was in Gambia last year. And I forgot what what tribe he was from it's, it's slipping me it's been a long day. But why don't we hear about those types of things and things like that. So again, that's just my my thing.

Kit Heintzman 1:31:20

What was it like traveling during the pandemic?

Marquis Allen 1:31:25

It was. It was tiring. Because I traveled to Africa, to Gambia and Senegal, and a heavens, oh, my gosh, it was a headache. And it was a pain. COVID Test 72 hours before departure. It's easy here in the US relatively provided, you can get an appointment somewhere. But in Africa, it's not so easy. I had to spend a day to go to a bank and pay the 50 US dollar or in Gambia, whatever the equivalent is for dalasi, I had to take a taxi, I had to go there, it was hot, I had to stand in line, I had to get a receipt. And then I had to pay the fee. And then I had to that was better the whole day. And then the next day, I had to actually go and take a taxi and go to the stadium to go get tested. And that was a whole that was day two. And then I actually had to wait. And I had to go somewhere where

there was internet or Wi Fi or something to access the results. So I could even leave the country because if I didn't, then they wouldn't allow me on the plane. So it was a pain. And it was extremely nerve racking. And so I said I certainly would not do anything like that now, everything would need to just go away. But it was frustrating. It was nerve racking. It was costly. And so it just made me not want to travel during the pandemic like that again. So I certainly won't be going back to Africa anytime soon. Or overseas, anywhere leaving North America probably I won't be going because there's just too many hoops.

Kit Heintzman 1:33:19

What do you think scholars in the social sciences and the humanities, so fields like literature and poli sci and sociology, what should we be studying right now to help us understand this moment that we're living for?

Marquis Allen 1:33:33

Wow. Wow, to understand it. I really think that this is a fantastic start. I think it's really a fantastic start. I think just connecting with people, what you're doing is, and the project that you're a part of, I think it's phenomenal. And I think you all are doing a great job at this by contacting people and getting their experiences. In this instance, hopefully I don't think it will ever happen. But, you know, I don't again, I don't think I'll ever run for political office. So if the file was obtained or you know, by whoever and they re edited or anything like that to make it say something that I didn't say, that's not on my mind right now. But I think that talking to people one on one, gaining their trust in being able to talk to them and see how they feel. While at the same time I'll So they're going across different demographics. I don't know how your how the project is segment and demographics. I don't know if if they're going to underserved communities, hopefully, that is tapped into. Because there are people the experiences of, let's say, a person in underserved, impoverished community, let's say, and, you know, I'm in Tennessee, and let's say in Mississippi, you know, a community that is where, you know, 25% of people are maybe at or below the poverty line, seeing how those types of seeing how their experiences are people of different ages of different races of different socio economic classes, seeing how the talking to them, and gaining their experiences, because in my own experience, I think that sometimes that people can maybe be underrepresented. And has I've seen in certain instances, not in this, or anything like this, but sometimes people are asked questions, or they're spoken to, and they may not understand what they're saying, or they may not. They may not, they may attribute certain words or questions certain way, and that their response might not be. Well, I mean, and I appreciate your open endedness. It's, there is no right or wrong response. You know, I appreciate that. And, but I just think that talking to people of different socio economic classes, talking to people in different income brackets, talking to people in different parts of the country, there's a difference between- of different political classes. I'm sure there's a different difference from a Democrat in California from a Democrat in Mississippi, I'm sure there are some commonalities there. And I'm sure that there are some differences there, too. And identifying how they feel, and what their experience is, because, again, everyone's going to have a different experience. So hopefully going across different ages, races, genders. I mean, you don't want to pick up the phone, Hey, are you You know, what's your blank, blank, blank? And, you know, what, what's going on? You know, we're we're seeking, you know, a certain demographic, but I just think talking to different people, different places, different walks of life, I think that you all could there's a wealth of information there. So just a treasure trove.

Kit Heintzman 1:37:36

I'd like you to imagine speaking to a historian in the future, someone far enough in the future, that they have no lived experience of this moment. What would you tell them cannot be forgotten about this moment? What like gap? Can they not allow to happen in the telling of this history?

Marquis Allen 1:37:56

I would tell them I'd say Don't forget about I'd say Don't forget about the people that may not have had a voice or whose voices may not have been able to be heard. While there may be a consensus on certain things, there are people that are, you know, forgotten or feel forgotten about. And because a person or persons may feel forgotten about, that doesn't mean that they didn't have an experience to or that didn't mean that they didn't have feelings or thoughts or emotions. And I would just say, on't forget about people that may not have the influence or the access to be able to share their feelings, their thoughts, their emotions. Don't forget about what people don't forget about the trauma, the mental trauma, that people that some people went through during this pandemic, because for some of these people, it was hell. People who were extroverts that need people that need to be that gain energy from being around people. For them, it was hell. And I think don't forget about them, although I'm not one. I would say don't forget about the mental impact or the impact emotionally that this pandemic or that this time period, had on people because a lot of people suffer in silence. And they carry a smile with them. But don't forget about it. And also, if you can, I don't know whose department it would fall up under. But don't be surprised if there are effects from people's mental and emotional well being that may be far felt in the future, or that may be far reaching. So it's kind of like thinking about well, when people say, for example, I hear people say, Well, yeah, we need to go back to the good old days, well, you've got to remember, you've got to bring some context there, if you want to do that, let's think about who they were good for. And let's think about who they were not good for. Because for you, and for me, the pandemic, not you as a person, but for me, the pandemic, it's, you know, I appreciate being able to work remotely, sometimes it takes off. And sometimes it's like, well, we don't have to meet face to face I can appreciate. But sometimes, it's like, I don't want to ignore, and I don't want to forget about those people who are going through mental and emotional distress right now. Because they, they can't get to go into the office. They can't get to interact with somebody. And I can't forget about that. And don't forget about those people. Don't forget about them. And and if you can, try to pinpoint what may be occurring at the point in time in the future, and see what the effects are, what was the precipitated to cause that to happen, that may have come from the pandemic, it may sound really confusing, and I probably confusing you. So I do apologize, but it's just like, you know, let's, before we just say, oh, these people are crazy. No, some people look at the TV show hoarders and they're like, oh, those people are crazy. I don't believe that. I said that to once, when I was ignorant. You know, you look at the TV shock value. All those people are just crazy. No, no, something happened. or some things happened. That got them to that point. I'm not a clinical psychologist, or a therapist or a psychotherapist, I'm not any of those things. But something happened to those people that are in that situation. And, and let's not, let's not neglect that. So if there are people that are suffering from the effects in the future, see what not to cause blame or not to pinpoint. But see if maybe the pandemic may have been a result of that, and maybe try to learn from it to hopefully mitigate a future potential pandemics effects, so that less people may go through what others may be experiencing at that point in time.

Kit Heintzman 1:43:14

I want to thank you so much for the generosity of your time, and the thoughtfulness of your answers. Those are all of the questions I know how to ask at this moment. But I'd like to open up some space. If there's anything you want to say that I haven't made room for. Please say so.

Marquis Allen 1:43:35

Well, I just want to thank you for your time, for your willingness to listen for about an hour and 48 minutes, which has probably talked for a good hour and 40 of it. So thank you for your patience. Thank you for your

endurance, thank you for what you're doing. And hopefully this maybe is maybe a drop that wears away at the rock somewhere. Hopefully, someone- some entity may find it helpful, hopefully. And I hope that you continue doing the work that you're doing and that not only are you but the establishment with whom you're associated with, go on and go forth to do great things.

Kit Heintzman 1:44:31

Thank you so much.